

| POSITION            | INITIALS | ID NO. | DATE    |
|---------------------|----------|--------|---------|
| FEES DETERMINATION  | BH       | 60045  | 5/20/98 |
| O.I.P.E. CLASSIFIER |          | 2      | 5/28/98 |
| FORMALITY REVIEW    | TMW3     | 70976  | 6-5-98  |

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 ÷ ..... Restricted      0 ..... Objected

| Claim | Date    |
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If more than 150 claims or 10 actions  
staple additional sheet here

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